

REQUEST FOR PROPERTY AND LIABILITY CERTIFICATES

DATE:

DIOCESE:

REP:

PROPERTY CERTIFICATE

NAME:

ADDRESS:

LEDGER PAGE #:

LOSS PAYEE/MORTGAGEE:

ADDRESS:

PROPERTY VALUE:

DESCRIPTION OF PROPERTY:

LIABILITY CERTIFICATE

NAME:

ADDRESS:

EVENT:

DATE:

LOCATION:

COMMENTS:

WHO IS REQUIRING CERTIFICATE:

DO THEY NEED TO BE NAMED ADDITIONAL ASSURED:

MINIMUM AMOUNT OF COVERAGE:	500,000 CGL	500,000 XS
	OTHER	1,000,000 XS
		OTHER

ORIGINAL TO:

COPIES TO: